

Meck**ACTs**Cabinet Member Workplan

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1. Expand Programs that Address Chronic Disease Disparities

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Promote Community Health by Reducing Health Disparities

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Expand Public Health's programs that contribute to reducing the burden of chronic disease disparities in the community by the end of the fiscal year

Rationale

While many Americans are living longer lives, they may not be living healthier lives and not all groups are experiencing equal life expectancy. Chronic conditions can diminish the quality of life due to disability, dependence on medication, and costly medical care. Locally and nationally chronic diseases, such as cancer, diabetes and heart disease, are the leading causes of disability and early death. More than half of all deaths in Mecklenburg are due to chronic conditions. Obesity, using tobacco products and limited physical activity are established risk factors for chronic diseases and other poor health outcomes. According to our local Behavioral Risk Factor Surveillance Survey (BRFSS), 69% of adults in Mecklenburg are either overweight or obese, 12% report smoking and 20% report getting no physical activity.

Mecklenburg County Public Health aims to address these risk factors and prevent chronic disease through policy advocacy, environmental and systems changes, and health education efforts. This work is generally focused on three main areas: (1) improving opportunities for safe, active living, (2) improving access to healthy foods, and (3) reducing tobacco use.

Another key element in preventing and managing chronic disease is improving access to primary care for individuals and families across Mecklenburg County. Primary care includes medical care as well as access to behavioral health and dental services. In 2021, the BRFSS showed that 23% of adults reported not having a primary care provider, and 17% of adults reported delaying dental care due to cost. Public Health currently provides financial support to clinics and health centers across the county that serve uninsured and underinsured adults. In FY2023, the department will complete a feasibility study focused on what resources are necessary to expand Public Health's pediatric dental clinic to serve adults as well.

Foundational to these efforts is a clear understanding of the disparities in the burden of chronic diseases. African Americans have higher rates of cancer, heart disease and diabetes as compared to Whites. Understanding these disparities allows us to enhance outreach and engagement efforts to populations most at risk for disease. The department's Community Health Assessment process ensures on-going review and analysis of health data to track disparities with regard to race, gender, income and geography. This on-going review of data informs the scope and allows us to note areas of improvement or areas of continued need.

Action Steps List the actions/events that need to take place.

- Expand the Food as Prescription program to increase access to healthy food and fresh produce in the community.
- Support voluntary adoption of tobacco-free environments at behavioral health organizations and colleges/universities by offering support with policy review, training, messaging, environmental supports, and policy implementation.
- Scale up the Safe Routes to School initiative which creates opportunities for children to increase their daily physical activity by safely walking, biking, and rolling, to, from, or at school.
- Complete a feasibility study in collaboration with the Community Oral Health Transformation (COrHT) Initiative of the BlueCross BlueShield of North Carolina Foundation and other stakeholders to identify the programmatic and physical infrastructure required to expand the department's pediatric dentistry program so that it can also serve adults.

- Number of food insecure clients who receive an additional serving of fruits and vegetables per day (target = 1,500)
- Number of community partners that implement tobacco-free policies (behavioral health, colleges/universities, etc.) (target = 14 behavioral health organizations and colleges/universities)
- Number of active partnership schools in the Mecklenburg County Safe Routes to Schools Program (target = 44)
- Complete the feasibility study focused on the programmatic and physical infrastructure required to expand the department's pediatric dentistry program so that it can also serve adults (Y/N)

Increase the Community's Capacity to Manage the Impacts of Violence and Trauma

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Promote Community Health by Reducing Health Disparities

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Increase the community's capacity to manage the impacts of community violence and trauma on health by the end of the fiscal year

Rationale

Community violence, and its associated trauma, have a severe impact on the health of our community. According to vital records data, the number of homicides increased by nearly 64% from 2018 to 2020. Additionally, violence prevention was identified by the community as one of the top four issues as part of the Public Health department's 2019 Community Health Assessment. Two high-profile, police-involved fatal shootings in 2013 and 2016, together with the peaceful protests and civil unrest that followed in the wake of these shootings, marked a turning point for Mecklenburg County. In response, Public Health secured federal grants to launch a Resiliency in Communities After Stress and Trauma (ReCAST) program in FY2019, established an Office of Violence Prevention in FY2021 and intensified efforts to support law enforcement agencies through the existing Child Development-Community Policing (CD-CP) and Crisis Intervention Team (CIT) programs.

Action Steps List the actions/events that need to take place.

- Launch the Community Violence Strategic Plan and complete the core year 1 actions focused on community engagement, multi-media prevention campaigns, program evaluation, and the community violence interruption initiative.
- Conduct trauma-informed care and resiliency trainings for the community through the ReCAST initiative.
- Expand CIT courses to include trainings specific to the needs of veterans.
- Launch CD-CP's partnership with Pineville Police Department including taking active referrals and providing all services that are a part of the program.

- Mecklenburg County Violence Prevention Plan year one goals implemented with the following components
 - Two new Community Violence Interruption Sites established (Y/N)
 - Community Engagement Framework developed and implemented (Y/N)
 - Multimedia Campaign implemented (Y/N)
 - Evaluation Framework established (Y/N)

- Number of people trained in trauma-informed care and resiliency through the ReCAST initiative (target = 250)
- Number of law enforcement officers who complete CIT for Veterans training (target = 30)
- Number of CDCP referrals received from Pineville Police Department

3. Increase Supportive Services for Pregnant & Postpartum Women

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Promote Community Health by Reducing Health Disparities

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Increase supportive services available to pregnant and postpartum women by the end of the fiscal year

Rationale

Reducing disparities in maternal, child, and infant health outcomes continues to be a major area of focus for Public Health and for the community. Despite an overall decline in infant mortality rates in Mecklenburg County, stark disparities persist in the outcomes for black infants compared to white infants. From 2016-2020, black infants in Mecklenburg County were three times more likely to die before their first birthday than were white infants. Similar disparities exist with other key health indicators including access to prenatal care, preterm birth, and low-birth weight. Regarding maternal mortality, from 2015-2019, there were 18 maternal deaths that occurred during pregnancy, birth and in the first six weeks after birth in Mecklenburg County. Of these deaths, 56% (10) or over half were among black women.

Mecklenburg County Public Health has several programs and partnerships aimed at improving health outcomes for women and children and decreasing perinatal health disparities. Case Management for High-Risk Pregnancies (CMHRP) and Care Management for At-Risk Children (CMARC) both provide case management services for high-risk pregnant women and/or to families with children ages zero to five meeting certain criteria. These services include establishing a medical home to promote healthy outcomes for mom and baby and accessing health care and social supports to promote overall wellbeing for children. The department has also partnered with Care Ring to support and implement A Guided Journey, a program that uses a community health worker model to provide services to high-risk pregnant women and new families with the aim of reducing perinatal health disparities and providing family support during this critical period. Finally, MCPH will continue efforts led by its Epidemiology team to increase access to timely and local data that can be used to better understand the health environment for new mothers in Mecklenburg County.

Action Steps List the actions/events that need to take place.

- Implement A Guided Journey (AGJ) in partnership with Care Ring in priority ZIP codes to support pregnant women.
- Provide care management services for women with high-risk pregnancies as part of the

- CMHRP program and to children from age 0-5 as part of the CMARC program.
- Increase access to timely and local data related to pregnancy and birth outcomes by releasing at least one epidemiologic report on maternal and child health.

- Percent of AGJ participants who have a medical home (target = 80%)
- Percent of AGJ participants who have established a reproductive life plan (target = 90%)
- Number of admissions to CMARC
- Number of admissions to CMHRP
- Produce and release at least one epidemiologic report on maternal and child health

4. Increase Prevention and Treatment Resources for Sexually Transmitted Infections

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Protect our community from infectious disease by leading prevention and response efforts

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Increase the availability of prevention resources and treatment services for people at risk of contracting sexually transmitted infections by the end of the fiscal year

Rationale

Reducing transmission of sexually transmitted infections (STIs), including HIV, continues to be a foundational goal of Mecklenburg County Public Health. Cases of syphilis have seen dramatic increases nationally and locally with cases nearly doubling in Mecklenburg County from 421 cases in 2018 to 710 cases in 2021. HIV infections have also fluctuated over the past few years. In 2020, 209 cases of HIV were diagnosed representing a decline compared to previous years. This decline was likely due to an overall decrease in people accessing testing services during the pandemic. In 2021, there were 276 newly diagnosed HIV infections, representing a return to pre-pandemic levels.

Mecklenburg County Public Health manages several large-scale efforts aimed at diagnosing, treating, preventing, and responding to cases of HIV and other STIs. These include onsite clinical services to test and treat diseases, community-level efforts like Ending the HIV Epidemic (EHE) plan, funding and support for clinics to provide PrEP services, and management of the Ryan White program as well as department-level efforts related to education, testing, treatment and disease investigation.

While many STIs can be easily and effectively treated, HIV diagnoses requires a more complex level of intervention including rapid linkage to HIV medical care and case management services. In addition to our department's programs, we have strong partnerships with other clinics, health systems and community-based organizations to provide on-going care and support for people living with HIV. Mecklenburg County Public Health is committed to expanding partnerships and outreach to high-risk populations to ensure testing, treatment and prevention services are accessible and appropriate to reduce the burden of HIV and STIs in the community.

Action Steps List the actions/events that need to take place.

Provide targeted HIV/STD counseling, testing and referral services at hours that are
accessible to persons at high-risk and in communities experiencing high incidence of HIV
and other STDs.

- Ensure rapid linkage to HIV medical care and antiretroviral therapy for all persons with newly diagnosed HIV.
- Provide PrEP services and wrap-around support, including transportation, for uninsured and underinsured persons who are at high risk of acquiring HIV.
- Conduct a social marketing campaign with an emphasis on educating the public about PrEP, the availability of HIV/STD prevention services, and awareness of the "Undetectable = Untransmittable" (U=U) message.
- Coordinate the federal Health Resources & Services Administration (HRSA) site visit to review Ryan White Program administration.
- Host a summit for medical providers and community partners to address the increasing cases of syphilis in the county.

- Percent of patients with STI symptoms or exposure to an STI scheduled for evaluation on same day of request (target = 95%)
- Percent of PrEP slots utilized for uninsured and underinsured persons who are at high risk of acquiring HIV (target = 90%)
- The number of people who saw or heard HIV prevention messages on social media platforms, billboards, and radio as part of the U=U social marketing campaign
- Coordinate the federal HRS site visit to review Ryan White program administration (Y/N)
- Host the summit for medical providers and community partners to address increasing syphilis cases in the county (Y/N)

5. Implement Measures to Reduce Transmission of Diseases and Infections

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Protect our community from infectious disease by leading prevention and response efforts

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Improve the implementation of measures that prevent food-, water-, and vector-borne diseases and reduce the transmission of respiratory infections by the end of the fiscal year

Rationale

The emergence and re-emergence of communicable diseases, the threat of bioterrorism and the potential for natural and manmade disaster, all necessitate the local health department be poised to respond immediately and effectively in a coordinated manner. Establishing Mecklenburg County Public Health as a trusted source of clear information as well as proper training and planning can help mitigate the impact of infectious diseases. In recent years, Mecklenburg County Public Health has demonstrated its leadership capacity in response to large scale events like COVID-19, Ebola and Hepatitis A outbreaks.

The department's Emergency Preparedness, Environmental Health, Communicable Disease, and Immunization programs all work collaboratively to identify, address and prevent infectious diseases in Mecklenburg County. The Preparedness Team is instrumental in ensuring County staff are properly trained and prepared to shift into appropriate response roles and coordinate efforts with external agencies. Disease surveillance, reporting and case investigation of reportable diseases is managed by the department's Communicable Disease program. The Environmental Health program provides routine inspections to prevent and respond to disease transmission via food, facilities, water and mosquitos. Finally, the Immunization program ensures access to routine, required immunizations and immunization services in response to outbreaks or exposures.

Providing education and access to COVID-19 vaccines remains a top priority as the department continues leading the COVID-19 response. As of May 2021, 64% of adults in Mecklenburg County are fully vaccinated but just 34% have received a booster. While the COVID-19 response dominated much of the work of the department in 2020 and 2021, it remains critically important that we continue to prepare for, respond to, and educate the public on existing disease threats such as monkey pox, vaccine-preventable diseases like flu, and foodborne diseases.

Continued collaboration between these programs is vital to preventing infectious disease in Mecklenburg County.

Action Steps List the actions/events that need to take place.

- Increase the percentage of high-quality state-required restaurant inspections completed
- Coordinate with other community partners to expand equitable access to COVID-19
 vaccines and tests including the primary vaccine series, booster shots, and vaccines
 delivered through the department's Home-Based Vaccination Program
- Expand flu vaccine services to uninsured adult residents of Mecklenburg County

- Percent of high-quality state-required inspections completed as measured by the food, lodging & institutional inspection rate (target = 85%)
- Percent of Mecklenburg zip codes meeting or exceeding 70% benchmark for primary Covid vaccine series (target = 72%)
- Percent of Mecklenburg County residents who have received at least one booster dose
 of Covid vaccine which also capture Public Health's work with partners to expand access
 to COVID-19 vaccines
- Number of vaccines administered through the Home-Based Vaccination Program (target = 1,000)
- Administer flu vaccine to uninsured adults in clinics and community setting (700 doses allocated per year)

6. Reduce Department Vacancy Rate

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Provide innovative, high-quality public health services through investments in people, technology, and processes

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Reduce the department's vacancy rate and achieve a stronger public health workforce by the end of the fiscal year

Rationale

A continued focus on workplace culture is critical to establishing an environment where staff and clients feel valued and meaningfully engaged in the department. Similar to local and national trends, MCPH is experiencing shifts in our workforce and attracting and maintaining top talent is a priority and challenge. Understanding staff development needs and establishing concrete training and development plans will also be a focus of the department.

As we navigate a growing and shifting workforce, we must also keep a clear focus on providing excellent customer service to our internal and external clients and operationalizing our tagline, "when we serve each other well, we will better serve our community."

Action Steps List the actions/events that need to take place.

- Work with hiring managers and Human Resources to recruit and retain top talent
- Implement MeckACTs Performance Management Process
- Review results from the de Beaumont Foundation's Public Health Work Force Interests & Needs Survey (PH WINS), the Employee Climate Survey and internal Customer Satisfaction Surveys and create a plan of action to address any issues of critical importance
- Review Service Essentials training for staff to ensure excellent customer service standards for internal and external customers in preparation for FY24 launch
- Dedicate a portion of the quarterly Middle Managers meetings to staff development activities or opportunities
- Create opportunities and tools for improved communication across the department
- Convene a staff-led recognition and wellness committee to coordinate internal department activities/initiatives and develop a charter to guide functions

- Department vacancy rate (target = 10%)
- ECS item: My department director clearly communicates what is going on in my department (target =90%)

- ECS item: My co-workers are respectful of each other (target = 95%)
- ECS item: I would like to be working at Mecklenburg County two years from now (target = 95%)

7. Initiate Electronic Health Record (EHR) Upgrades

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Provide innovative, high-quality public health services through investments in people, technology, and processes

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Initiate the Implementation of an upgraded Electronic Health Record (EHR) technology solution by the end of the fiscal year

Rationale

Public Health will begin the replacement of its Electronic Health Record (EHR) software system in FY2023. The department completed a gap analysis in 2019 to identify challenges with the current EHR system that must be addressed during the transition to a new system. The gap analysis noted Public Health's need for greater flexibility to make minor configuration changes to the software at the local level without going through a cumbersome process with the vendor and the need for better integration of applications to prevent data-loss and the need for time-consuming workarounds. The new EHR system will go live in FY2024, but the department must complete crucial planning and development work in FY2023 to ensure the project remains on target.

Action Steps List the actions/events that need to take place.

Develop and execute a detailed project plan, which will include:

- Releasing a Request for Proposals, evaluating responses from prospective vendors, and selecting a new EHR system that best meets the department's needs
- Developing a transition plan which will include designing the new software system in a test environment
- Creating a plan for migrating all data from the current EHR system to the new EHR system.
- Identifying systems and integrations required for the new EHR system that include but are not limited to lab systems, state health information exchange, immunization registry, and applications used for emergent needs
- Establishing a risk management plan for the EHR project

Evaluation Criteria What does success look like? How will you know when this goal is achieved?

Successfully develop and execute a plan to migrate all data to the new EHR system
including components for vendor selection, a transition plan, a data migration plan, critical
systems integrations and a risk management plan (Y/N)

8. HHS Integration

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Develop a system-wide approach to integrated service delivery to improve the health and well-being of Mecklenburg County residents

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Improve economic, health, and food security outcomes by opening additional Community Resource Centers and integrating service coordination for Mecklenburg County residents

Rationale

In 2015, Mecklenburg County kicked-off an HHS Integration Initiative under the Bringing Mecklenburg County to You (BMC2U) project. The primary objective of this Initiative is to develop, implement and refine a comprehensive, integrated Health & Human Services business model that encompasses programs currently administered by Community Support Services (CSS), Department of Community Resources (DCR), Department of Social Services (DSS), Public Health (PH), and targeted community partners.

The initiative proposed a system of "Community Resource Centers" that provide a continuum of County and community partner services at a single location, expanding access to services across the County and meeting customers where they are. The prototype Community Resource Center opened at 3205 Freedom Drive in June 2018. Based upon the success of the prototype, Mecklenburg County is preparing for the expansion of the Community Resource Center (CRC) model to additional locations.

Along with the CRC model, Mecklenburg County will implement an integrated HHS Service Connection process for select staff/teams serving pregnant and post-partum women. The process involves the following three steps:

- Assessing customers using a Social Determinants of Health Screening Tool to determine household needs.
- Reviewing the resources/benefits a customer may be receiving or eligible for using Single View of the Customer technology which connects data software systems across HHS.
- Referring customers to needed services/resources using NCCARE360, a statewide online coordinated care network, that allows for referrals to resources and services throughout the community.

Action Steps List the actions/events that need to take place.

In partnership with the HHS Leadership Team and CRC Project Team:

• Develop baseline measures to determine the impact of CRC services on the social

determinants of health for each CRC service area.

- Implement and operationalize revised CRC Governance Charter and performance metrics.
- Facilitate the opening of the Northeast CRC.
- Lead development of a phased opening plan for CRC 3, 4 and 5.
- Design, develop and implement an integrated HHS service connection process to serve pregnant and post-partum women.

Evaluation Criteria What does success look like? How will you know when this goal is achieved?

Successful completion of all Action Steps.

9. Department Equity Action Plan

Goal Alignment List your goal or the strategic priority that this goal will help achieve.

Accountable Government: Equity and Inclusion

Goal Write a specific, measurable, attainable, relevant, and time-bound goal.

Create a Department Specific Equity Action Plan

Rationale

An essential component to our County Equity Action Plan is alignment among our departments. Alignment is the bridge between strategy and execution. The criteria for implementing our Equity Action Plan requires that our systems, leadership, staff, and culture all align with the ideals of our plan and requires the specificity of our department's functions. The development of our Department Equity Action Plans will help us; identify our individual department and enterprise responsibilities, create structure, process, and operational strategy at the department level, get clear on our departmental equity roles and responsibilities, and understand the experiences, skills, and competencies needed to execute on our equity plan.

Action Steps List the actions/events that need to take place.

- Complete FY20-22 County Equity Action Plan
 - Document progress on Existing County EAP
 - o Participate in OEI Listening Session and complete the Equity Needs Assessment
- Meet with Chief Equity & Inclusion Officer to Review and Develop Department Equity Action Plan
- Re-Establish Department-Specific Equity Action Team in alignment with OEI Sequencing
- In partnership with the Office of Equity & Inclusion, create department-specific equity vision, align department goals and objectives to the Equity Action Plan and identify equity-centered outcome measures

- FY20-22 County Equity Action Plan Completed and Progress Documented
- Department Equity Action Plan Completed
- Department re-establishment or creation of Department Equity Action Team in alignment with OEI Sequencing

